

Attorney's Ref: ANDPAT/184/US

Date: March 24, 2004

Irene O'Brien

MAIL STOP PATENT APPLICATION Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450 17497 U.S. PTO 10/807879

Sir:		1749						
Transr	mitted herewith for filing is the 🖂 Utility 🔲 Design patent application of: Inventor(s): Helmuth GABL							
For:	: SCREEN FOR CLEANING A FIBER SUSPENSION							
Enclos	sed are: 13 Sheets Of Specification 3 Sheet(s) of Drawing(s) Containing Figures 1 − 4 Formal Informal A Return Receipt Postcard. An Assignment Of The Invention A Certified Copy of an Austrian Priority Document. An <u>Unsigned Inventor's Declaration Small Entity Status Claimed by Applicant. Application Data Sheet. Information Disclosure Statement with Form PTO 1449 Request for Non-Publication of Application</u>							
ງ ∏ If o ∙	checked, this application is a: Continuation Continuation-in-part Divisional							
Applic:	ation of prior United States Patent Application No.: previously examined by (Examiner) in Group/Art Unit							
an oa	ontinuation or Divisional Applications: The entire disclosure of the prior application, from whath or declaration is supplied, is considered a part of the disclosure of the accompany uation or divisional application and is hereby incorporated by reference. The incorporation of the relied upon when a portion has been inadvertently omitted from the submitted application.	ing can						
"Expre	eby certify that this paper or fee is being deposited with the United States Postal Servess Mail Post Office to Addressee" Service under 37 CFR 1.10 on March 24, 2004, and seed to the "Mail Stop Patent Application, Commissioner For Patents, P.O. Box 14 and and a 22313-1450".	l is						

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The filing fee h	as been o	alculate	d as shown	below:						
Design App	lication Fe	or 🗌	Small Entity	y = \$170	☐ Not Small E	Not Small Entity = \$340				
Utility Appli	cation Wit	h Fee Ca	alculated Be	elow:						
☐ If Checked, Applicant Is A SMALL ENTITY.										
	No. <u>Filed</u>	CLAIMS	S No. <u>Extra</u>	<u>SMALI</u>	_ENTITY	LARGE	<u>ENTITY</u>			
Total Claims	21	20=	1	x \$ 9 =	\$	x \$18 =	\$ 18.00			
Independent Claims	1	3=	0	x \$43 =		x \$86 =				
Basic Fee					\$385.00		\$770.00			
Multiple Deper	ndent Clai	ms		x \$145		x \$290				
Presented				TOTAL	\$	TOTAL	\$ <u>788.00</u>			
A check in the amount of \$788.00 to cover the filing fee is enclosed.										
Please charge my Deposit Account No. 16-2563 in the amount of \$ to cover the filing fee. A duplicate copy of this sheet is enclosed.										
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	ndency of	this app	olication and	d to credit a	ge fees under 37 ny overpayment					

Clifford P. Kelly, Reg. No. 35,213

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